I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WALTER BOYCE

Electronic Signature of Signing Officer/Director Detail

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT **DOCUMENT# 641800**

Entity Name: MONFORT CORPORATION

Current Principal Place of Business:

1040 6TH AVENUE NORTH NAPLES. FL 34102

Current Mailing Address:

1040 6TH AVENUE NORTH NAPLES, FL 34102

FEI Number: 59-1947242

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

FORESMAN, W., F. 1040 6TH AVE. NORTH NAPLES, FL 34102 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Officer/Director Detail : Title Title PD SD Name BOYCE, WALTER Name HELLARD, STEPHEN Address SUITE 200 - 368 SLATER STREET Address City-State-Zip: OTTAWA K1R 5C1 City-State-Zip: OTTAWA K1R 5C1

FILED Jan 20, 2015 Secretary of State CC9341074494

Date

Certificate of Status Desired: No

SUITE 200 - 368 SLATER STREET

01/20/2015 Date

DIRECTOR